

<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. 20846-176942
Application No. 10/043,879-Conf. #6278	Filing Date January 14, 2002	Examiner B. W. Dada	Art Unit 2135

Applicant(s): Fagan et al.

Invention: **SECURE MUTUAL AUTHENTICATION SYSTEM**

**TO THE COMMISSIONER FOR PATENTS**

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	15	- 20 =	0	x 50.00	0.00
Independent Claims	3	- 3 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00

☒ Large Entity

☐ Small Entity

☒ No additional fee is required for this amendment.

☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

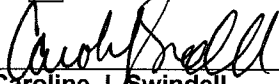
☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 22-0261  
as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

  
Caroline J. Swindell  
Attorney/Agent Reg. No.: 56,784

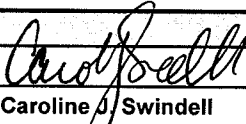
Dated: March 15, 2007

VENABLE LLP  
P.O. Box 34385  
Washington, DC 20043-9998  
(703) 760-1676

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

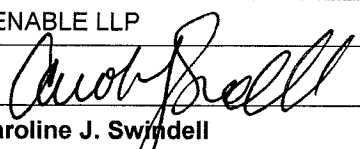
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2006</b>		<b>Complete if Known</b> Application Number 10/043,879-Conf. #6278 Filing Date January 14, 2002 First Named Inventor Robert H. Fagan Examiner Name B. W. Dada Art Unit 2135 Attorney Docket No. 20846-176942	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 0.00		

METHOD OF PAYMENT (check all that apply)							
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____			
<input type="checkbox"/> Deposit Account	Deposit Account Number: 22-0261			Deposit Account Name: Venable LLP			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee					
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments					
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description	Fee (\$)	Small Entity Fee (\$)					
Each claim over 20 (including Reissues)	50	25					
Each independent claim over 3 (including Reissues)	200	100					
Multiple dependent claims	360	180					
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
15 - 20 = 0	x 50.00	= 0.00		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
3 - 6 = 0	x 200.00	= 0.00					
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
- 100 =	/50	(round up to a whole number) x	=				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)				<u>Fees Paid (\$)</u>			
Other (e.g., late filing surcharge):							

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	56,784
Name (Print/Type)	Caroline J. Swindell	Telephone	(703) 760-1676
		Date	March 15, 2007

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<h1>TRANSMITTAL FORM</h1> <p><i>(to be used for all correspondence after initial filing)</i></p>	Application Number	10/043,879-Conf. #6278
	Filing Date	January 14, 2002
	First Named Inventor	Robert H. Fagan
	Art Unit	2135
	Examiner Name	B. W. Dada
Total Number of Pages in This Submission	Attorney Docket Number	20846-176942

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> <b>Fee Transmittal Form SB/17</b> <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> <b>Amendment</b> <input checked="" type="checkbox"/> <b>Amendment Transmittal</b> <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> <b>Yellow filing receipt</b> <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; padding: 2px; width: fit-content;">Remarks</div>		
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm Name	VENABLE LLP	
Signature		
Printed name	Caroline J. Swindell	
Date	March 15, 2007	Reg. No. 56,784

# PATENT PROSECUTION RECEIPT OF FILING

# 138521

Attorney/LAA:

CJS:cja

Venable Filing Number

Atty. Docket No: 20846-176942

PTO Due Date:

March 15, 2007

Current Date:

March 15, 2007

Title of Application: SECURE MUTUAL AUTHENTICATION SYSTEM

Application No: 10/043,879

Filing Date: January 14, 2002

Patent No. :

Issue Date:

The following items were received from Venable LLP, Washington, D.C.,  
by the U.S. Patent & Trademark Office on the date stamped hereon:

## U.S. PTO FEES ENCLOSED

- ☒ Transmittal Form SB/21
- ☒ Fee Transmittal Form SB/17
- ☐ New U.S. Patent Application  
( pages of specification/claims)
- ☐ Rule 53(d) Continued Prosecution Application
- ☐ Rule 53(b) Continuation or Divisional Application  
(attach copy of specification, claims, drawings and declaration)
- ☐ U.S. National Stage Application of PCT Application
- ☐ Request for Continued Examination (RCE) under 37 CFR 1.114
- ☐ Application Data Sheet
- ☐ Substitute Specification
- ☐ Priority Document-Cert. Copy of  
Appln.#: ; Country: ; Date Filed:
- ☐ Formal Drawings ( sheets, Figs.)
- ☐ Inventor Declaration
- ☐ Assignment w/Cover Sheet
- ☐ Response to Notice to File Missing Parts
- ☐ Response to Notice to File Missing Requirements
- ☐ Response to Requirement
- ☐ Information Disclosure Statement with cited references
- ☐ Response
- ☒ Amendment
- ☒ Amendment Transmittal
- ☐ Power of Attorney
- ☐ Petition to Revive
- ☐ Sequence Listing – CDR Enclosed? Yes No
- ☐ Request for Non-Publication
- ☐ Reply Brief (in triplicate) / Request for Oral Hearing
- ☐ Confirmation of Hearing Petition
- ☐ Issue Fee Transmittal
- ☐ Certificate of Correction
- ☐ Maintenance Fee Transmittal
- ☐ Status Inquiry
- ☒ Other: (Please describe below)
- ☒ Yellow filing receipt

_____	Filing Fee
_____	Surcharge Fee
_____	Additional Claim Fee
_____	Recordation/Indexing Fee
_____	IDS Fee
_____	Extension Fee
_____	Notice of Appeal Fee
_____	Brief on Appeal
_____	Oral Hearing Request Fee
_____	Petition Fee
_____	Issue Fee
_____	Publication Fee
_____	Maintenance Fee
_____	Other Fees (Describe)
0.00	<b>Total Fees Paid</b>

☐ Check Number \_\_\_\_\_ Attached

☐ Charge Deposit Account No.  
22-0261

\*If Deposit Account was used, was a  
copy of this form sent to Accounting?

☒ Yes ☐ No

Date 3/15/07

Reviewed By:

Signature of Attorney